

# INTRODUCTION

This document is the result of a county-wide health needs assessment, known as the Community Diagnosis Process, conducted by the Grundy County Health Council (GCHC) and facilitated by the Tennessee Department of Health Assessment and Planning Program. Begun in 1998, the Community Diagnosis Process has enabled GCHC members to:

- Analyze the health status of the community
- Evaluate health resources, services and systems of care within the community
- Assess attitudes toward community health services and issues
- Identify priorities
- Establish a baseline for measuring improvement over time

Meeting monthly, the GCHC has given careful consideration to county-specific primary data and secondary data. The collection of primary data consisted of a community assessment survey, a behavioral risk factor survey, and observational information from GCHC members. The community assessment survey (see yellow pages) is an opinion-based, non-scientific survey asking key members of the community how they feel about certain local health services. The behavioral risk factor survey (see green pages) is a scientific survey that asks respondents about their lifestyles, in an attempt to identify any activities that may be a risk to their health. It is a random sample of 200 Grundy County residents and is to be representative of the entire county. GCHC members supplemented the two survey instruments with their own observations of situations, events, interactions, behaviors, and prevailing community attitudes.

To compliment the primary data, the GCHC analyzed a wealth of secondary data (see blue pages). The county-specific data includes birth, morbidity and mortality statistics and basic demographic information. Most of the data was presented showing multiple year rates, dating back to 1985, so the council was able to look for trends in the data. The GCHC was able to compare county-specific statistics with regional and state rates and “Year 2000 Objectives” to determine whether Grundy County is following or deviating from the trend of the surrounding counties or the trend of the state as a whole and whether the county is progressing toward national objectives.

As part of the information collection, the GCHC utilized the Grundy County resource directory, provided by the Governor’s Prevention Initiative Program, to identify gaps in the community’s network of services. The inventory of resources provides a comprehensive listing of existing programs, community groups, agencies, and other services that are available to the community to help address identified health issues. The directory also includes available resources that are external to the county (i.e. Managed Care Organizations).

After several data dissemination sessions, the GCHC prioritized the health issues highlighted in the assessment. A formula, scoring the size of the problem, seriousness of the problem, and effectiveness of available interventions, was applied to each health issue. Cognizant of the assessment results, each member applied his or her own score to the problem and a sum total of all council members’ scores determined the order of priority. The council then decided how many of the priority health issues they felt they could effectively address in full consideration of the following:

- Does it make economic sense to address the problem?
- Are there economic consequences if an intervention is not carried out?
- Will the community embrace an intervention for the problem? Is it wanted?
- Is funding currently available or potentially available for an intervention?
- Do current laws allow intervention activities to be implemented?